

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

3/

FILED
Apr 02, 2007 8:00 am
Secretary of State

03-14-2007 90030 014 ***158.75

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1. Entity Name

PLANTATION RETIREMENT, INC.



Principal Place of Business

2654 GRAND BLVD.
HOLIDAY, FL 34690

Mailing Address

2654 GRAND BLVD.
HOLIDAY, FL 34690



02262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3596919

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BILLINGSLEY, ROSEMARY J
2654 GRAND BLVD.
HOLIDAY, FL 34690

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Rosemary Billingsley

Signature, typed or printed name of registered agent, and title if applicable.

NOTE: Registered Agent signature required when reappointing.

Feb 27 07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BILLINGSLEY, ROSEMARY
STREET ADDRESS	2654 GRAND BLVD.
CITY - ST - ZIP	HOLIDAY, FL 34690
TITLE	STD
NAME	RICCARDO, THOMAS C
STREET ADDRESS	2654 GRAND BLVD.
CITY - ST - ZIP	HOLIDAY, FL 34690
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rosemary Billingsley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 27 07

Date

Clerk's Phone

Thomas C Riccardi

March 27 07